ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | S. Z. o | | 08-07-01 |
| O.I.P.E. CLASSIFIER | C | 2.2 1/14/01 | |
| FORMALITY REVIEW | C C | JC1114 | 9-7-01 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✓ | ................................ Rejected | N | ................................ Non-elected |
| = | ................................ Allowed | I | ................................ Interference |
| − | (Through numeral)... Canceled | A | ................................ Appeal |
| ÷ | ................................ Restricted | O | ................................ Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)